

Hegar's instruments (up to No. 12). It could be then easily made free and extracted. The latter measured 16 cm. in length, the hook 3. Six days later the woman was discharged in a satisfactory state. Dr. Popoff has been able to collect 11 similar cases from international literature. In 4 of them hair pins were found in the uterine cavity; in 1 a metallic catheter; in 1 a piece of candlestick; in 1 bone; 1 a darning needle; 1 a seton-needle; 1 a quill; 1 a small wooden stick. The author draws attention to the following facts: (1) Even a prolonged sojourn of foreign bodies in the womb does not give rise to any serious symptoms beyond some catarrhal discharge. (2) Even when introduced into a pregnant womb, foreign bodies may remain without any influence on pregnancy, the latter renewing its normal course after their withdrawal. (3) Sharp foreign bodies may penetrate through the uterine wall into the peritoneal cavity, while others having a certain shape may get into the cavity *via* Fallopian tubes (as Freund's and Kemperick's cases have proved).—*Vratch*, No. 18, 1889.

VALERIUS IDELSON (Bernel).

II. Primary Cancer of Female Urethra. By PROF. IVAN M. LVOFF (Kazan, Russia). A highly anæmic and emaciated woman, æt. 46 years, sought the author's advice on account of extremely frequent, difficult and painful micturition. According to her statement, she had been always healthy until ten years ago, when she had begun to experience pain on passing water. For eight years the pain had been but slight and occasional, but subsequently had become so considerable and constant that she had been compelled at last to apply to a doctor. The latter had found vegetations about the urethral orifice and removed them. The vegetations, however, had rapidly reappeared again and again to be treated in the same way. When first seen by Dr. Lvoff in May, 1888, the patient had her urethra completely filled up with luxuriant polypoid new growths. They were removed partly by scissors, partly by ligature, which was followed by relief, but in July the symptoms returned with aggravated intensity. On examination in September, there was found "a bundle of rosy, soft, easily bleeding, tender papillæ, about 1 cm. long, protruding from the

meatus and growing out from the urethral mucous membrane all round." They occupied nearly two-thirds of the whole length of the canal, the urethral walls anteriorly being rather firm. Catheterization caused great pain and some hæmorrhage and was very difficult (in consequence of the blockage). The bladder and urine, however, as well as all external and internal genitals and all other organs of the body, proved to be perfectly normal. Neither could gonococci be found in the vaginal and urethral secretion. A careful microscopic examination of several papillæ excised showed that the new growth was nothing else than a tumor with flat epithelial cells. The treatment adopted consisted in a thorough excision of the whole new growth, together with the urethral mucous membrane as far back as the neck of the bladder, after which the canal was washed out with a solution of trichloride of iodine (1:2,000; *vide infra*), painted with a solution of perchloride of iron, and plugged with iodoform gauze. The plugging was kept up for five days. For a fortnight the urine was drawn off by a catheter. About the sixteenth day the patient's micturition became painless and regular, and she could be discharged. When seen six months later, the woman continued to be in best health. No stricture developed, a Nélaton's sound No. 18 passing quite freely into the bladder, and the meatus generally looking normally. Dr. Lvoff believes that his case is yet unique; at least he has been unable to find in international literature any other instance of a primary cancer of the urethra. [Trichloride of iodine (ICC.), introduced by Professor Langenbeck, of Berlin, is regarded by Professor Lvoff as the best antiseptic means of all yet known. The same high opinion has been formed by Drs. Levskin and Felser, of Kazan, who now use the drug in a routine way in the surgical and ophthalmic clinics respectively. *Vide the St. Louis Med. and Surg. Jour.*, February, 1888, p. 108. *Reporter*.—*Pract.*, 1889, No. 34.]

VALERIUS IDELSON (Berne).

III. Upon the Intra-Abdominal Treatment of Displacements of the Uterus. By G. RUGGI. The author's procedure is as follows: The patient is placed in the dorsal position, in a good